

1095-C Reissue Request Form ^[1]

Please use this form to request 1095-C tax forms.

We will email a replacement 1095-C no later than **four business days** from receipt of this completed form.

First Name * _____

Last Name * _____

Email _____

Address _____

City _____

State

- None -



Zip Code _____

Last four digits of your Social Security Number * _____

Date of Birth *

Month



Day



Tax Year Requested * _____

Source URL: <https://www.cu.edu/employee-services/forms/1095-c-reissue-request-form>

Links

[1] <https://www.cu.edu/employee-services/forms/1095-c-reissue-request-form>